

Building Permit # _____

MECH Permit **M#** _____

Department of Planning & Community Development
Division of Building Construction Services
400 Granby Street, Norfolk, Virginia (757) 664-6565

Project Address: _____ Unit _____ Application date _____

PLEASE PRINT

Property Owner <input type="checkbox"/> Tenant <input type="checkbox"/>	Contact Person: _____ Phone # _____
Name: _____	Applicant Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Agent <input type="checkbox"/> Design Prof. <input type="checkbox"/>
Address: _____	Contractor State License # _____ Class A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> LTD <input type="checkbox"/>
City/State/Zip: _____	Applicant's Name: _____
Phone #: _____ Fax #: _____	Phone # _____ Fax # _____ cell phone _____
E-Mail Address: _____	Address: _____ City/State/Zip _____
	E-Mail Address: _____

Residential ☐

Work to be performed on:

Multiple Family ☐

Commercial ☐

Type of work: New equipt ☐ Exact replacemer ☐ Fuel Conversion ☐ Additional Equipment ☐ Other ☐ **PROJECT Cost \$** _____

EQUIPMENT

BTU'S

___ boiler	G O E	_____
___ hydro-heater	G O E	_____
___ furnace	G O E	_____
___ package unit	G O E	_____
___ space heater	G O E	_____
___ heat pump/ condenser		_____
___ air handler/fan coil unit/vav box		_____
___ prefab fireplace NG LP		_____
___ gas logs NG LP		_____
___ woodstove/ insert/ fireplace		_____
___ burner G O		_____
___ water towers		_____
___ chillers		_____
___ clothes dryer G E		_____
___ incinerator/ crematory		_____
___ chimney liner		_____ size
___ vent connector/ vent		_____ size

Remarks _____

Quantity & Type of Equipment

DUCT SYSTEMS

___ exhaust system _____ outlets
___ ventilation system _____ outlets
___ air distribution system _____ grilles
___ fire/smoke dampers _____
Residential. Exhaust
___ Bathroom ___ clothes dryer ___ kitchen hood

FANS

___ exhaust ___ make up ___ ventilation
___ res. bath fan(s) ___ res. kitchen hood(s)

Hydronic Piping

___ steam ___ hot water ___ chilled water
___ ground water heat pump loop

Backflow Device

___ testable devices
___ non-testable devices

Refrigeration Equipment & Piping

___ compressor ___ cooler ___ piping

FUEL STORAGE & DISTRIBUTION

___ fuel lines ___ outlets G O
___ gas lines ___ outlets (permit separately)
TANK(S) ___ aboveground ___ underground
___ propane ___ fuel oil ___ gasoline ___ other
manufacturer _____
serial # _____
capacity _____
___ dispenser ___ tank monitoring station

Miscellaneous. Equipment

com. hood ___ type I ___ type II ___ condensate
cooking equipment; please list

Office Use Only

Approved by: _____ Date: _____
Permit Fee: \$ _____ Admin Fee \$ _____
Cash _____ Check # _____ Cashier _____
Remarks: _____

I agree to perform the above work in conforms with all City of Norfolk ordinances & regulations and the Uniform Statewide Building Code.

Print name _____ Signature _____ Date _____